

Waiver Request of Specific Life Safety Code Provisions

12/22/2011

Name of Facility _____

City/State _____ CCN# _____

Phone # _____ Contact Name/Title _____

Survey Date _____ K-Tag _____ Annual or Temporary _____

Requested Waiver End Date _____ Please use one form per K- tag waiver request

Temporary Waivers; Allow a nursing home time to implement an acceptable POC without the imposition of mandated remedies. Progress reports regarding the advancements or problems should be made to the State Agency Fire Authority. Extensions must be requested prior to a RV and limited to extreme circumstances. Failure to achieve compliance by the end-date will result in the recommendation of an appropriate enforcement remedy which will be imposed as outlined in 7410F3 of the SOM.

Annual Waivers; Allow a facility to achieve compliance when it is difficult to correct a requirement. Waivers will be re-evaluated during subsequent recertification surveys.

Additional Safety Measures: *The POC must address increased fire safety awareness as required by SOM 7410F1 and the documentation of the additional safety measures shall be kept on-site and provided to surveyors.*

Create or choose from additional safety measures below to compensate for the deficiency:

Circle items chosen and attach details.

1. Additional Fire Extinguishers	2. Additional smoke detection
3. Additional sprinklers/water curtain	4. Infrared inspection of motors and electrical panels
5. Additional inspections	6. Local fire department: monthly inspections
7. Additional maintenance	8. Local fire department: quarterly inspections
9. Install additional/horizontal exit	10. Local fire department: review of emergency plans
11. Additional fire drills	12. True fire watch
13. Safety rounds (dedicated, all areas inspected for fire safety issues)	
a. Once per shift/per day	b. Once per day
14. HVAC shut down tied to fire alarm	15. Practical and/or competency skills testing
16. Hands-on fire extinguisher training	17. Emergency procedure training
18. Hire a structural/electrical/ fire protection engineering firm to develop a plan of action	
19.	20.

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Due Dates	Justification	
<p>Send information to your Fire Authority on the following dates</p> <p>Milestones</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<p>Evidence the deficiency does not pose a hazard to the occupants</p>	
<hr/> <hr/> <hr/> <hr/> <hr/>	<p>How correction poses a hardship to the facility</p>	
<p>Evidence of Correction (within 15 days of end date)</p> <hr/>	<p>Construction milestones (NA for annual waivers)</p>	
<p>Administrator <i>(Signature)</i></p>	<p>Title</p>	<p>Date</p>
<p>Corporate Office <i>(Signature)</i></p>	<p>Title</p>	<p>Date</p>

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Failure to follow the plan may result in waiver revocation and enforcement actions